



## VILAS COUNTY FORESTRY, RECREATION, & LAND DEPARTMENT

Allan J. Murray- Forest Administrator

330 Court Street, Eagle River, WI 54521

Telephone: (715) 479-5160; Fax: (715) 479-5573

### VILAS COUNTY FORESTRY, RECREATION, & LAND DEPARTMENT APPLICATION FOR POWER-DRIVEN MOBILITY DEVICE (PDMD) PERMIT FOR DISABLED ACCESS

#### Section 1: Application Information

Applicant Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

#### Proof of Mobility Disability (One required):

- ☐ Parking Identification Card issued by WI DOT Number: \_\_\_\_\_  
(or attach copy)
- ☐ Disabled Parking License Plate Number: \_\_\_\_\_
- ☐ Class A, B, or C Disability Permit issued by WI DNR Number: \_\_\_\_\_  
(or attach copy)
- ☐ Verbal assurance (*which is not contradicted by observable fact*)

#### Section 2: Power-Driven Mobility Device (PDMD)

Description of PDMD (type/model, width, height, drive train, etc. (permits are limited to only one device- example- 2017 Yamaha Grizzly- green)):

---

---

---

#### Section 3: Location of Access Request- (note that access to gated areas may be limited by environmental and safety concerns)- (please attach a map if possible)

---

---

---

---

#### Section 4: Restrictions

A Permit, if approved, will authorize the applicant to operate a PDMD on the trail(s) listed in the Permit. The applicant is responsible to observe all other applicable rules and regulations regarding the safe operation of the PDMD on the County trail(s). Possible restrictions will be determined by department based upon location request, safety factors, and environmental factors

A Permit, if approved, is subject to the following restrictions:

- a) A permit, if issued, is valid on the designated trail only. Off trail operation is not permitted.
- b) A permit, if issued, provides authorization to operate a PDMD to the applicant only. Two additional persons are permitted to assist and accompany the applicant.
- c) A permit, if issued, may be revoked for failure to comply with the terms and conditions contained herein or if permittee provides false information as part of the application.
- d) Use of a mobility device on the permitted area is at permittee's own risk. Issuance of a permit does not constitute a guarantee of safe conditions on the permitted area. Use under a permit is subject to the provisions of Wisconsin's Recreational Immunity Law [s. 895.52, Wis. Stats.].
- e) Seasonal or temporal conditions may require suspension or modification of an issued permit. The Department will notify permittee in writing where practical, that permitted areas are temporarily restricted.
- f) Personal information collected will be used for property administration and law enforcement purposes and may be provided to requesters to the extent required by Wisconsin's Open Records law [ss. 19.31-19.39, Wis. Stats.].
- g) The issuance of a permit creates no right to future access on permitted routes or areas.

☐ Additional Restrictions (determined by department based upon location, environmental, and safety factors):

---

---

---

---

Permittee agrees to the following:

- h) To carry an issued permit and all attached documentation at all times of operation, and display the permit to the Department and its law enforcement officers on demand. To prominently display the Department issued placard on the PDMD.
- i) To yield to all pedestrians by stopping and/or pulling over.
- j) To operate only in areas specified in the permit and in a safe and responsible manner. Off trail operation is not permitted.
- k) To comply with all applicable laws and regulations.
- l) To clean and properly dispose of all soil, vegetation, and debris from device and clothing prior to each use.

- m) Only two additional persons may occupy the device for the purpose of assisting the permittee.
- n) To use the permitted device to remove or otherwise transport only game taken and tagged by the permittee.
- o) Permittee will be held financially responsible for resource damage and restoration that occurs as a result of the use of this permit.
- p) The permittee will not operate the PDMD in excess of 5 mph, while within areas authorized by a permit.
- q) Only equipment that is to be used by the applicant and the assistants may be hauled on the PDMD. No other person(s), tree stands, blinds, bait may be hauled on the PDMD.

**Section 5:      Applicant Certification**

I certify that all information which I provided in this Permit Application is true and I agree to the terms of this application. I also understand that an actual permit will be issued which will require further action upon my part and that the actual permit may not fully reflect the entirety of this application. This application will be review and action taken to approve, modify or deny within 3 days of receipt by the department.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Section 6:      Approval/Denial/Accommodation**

Date Received at Forestry Office: \_\_\_\_\_

Received by: \_\_\_\_\_

Applicant's information has been reviewed.

- ☐ **The application is approved and a full permit has been provided to the applicant.**
- ☐ **The application is denied for the following reason(s):**
- i. The physical characteristics of the device.
  - ii. The volume of pedestrian traffic at the proposed use location.
  - iii. The design and physical characteristics of the proposed use and/or the site.
  - iv. The potential safety hazards.
  - v. The proposed use creates substantial risk of harm to environmental, natural or cultural resources.
- ☐ **The application has been conditionally approved with the following modifications for accommodations being provided to the Permittee:**

---

---

---

**The Vilas County Forestry Department may immediately cancel a permit by oral or written notice if the permittee uses the identified PDMD in any other manner other than what is specified herein or if the County Forest Administrator determines a risk to public safety or harm to the immediate environment or natural or cultural resources.**

**The permit, once approved, must be kept with applicant at all times while accessing the above location on the Vilas County Forest.**

**Reviewed and Approved on behalf of the Vilas County Forestry, Recreation, & Land Department:**

Signature: \_\_\_\_\_  
Title: County Forest Administrator

Date: \_\_\_\_\_

Vilas County Forestry, Recreation, & Land Dept.  
330 Court Street  
Eagle River, WI 54521  
Phone: 715-479-5160